

GMD

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

CJA 23
(Rev. 5/98)IN UNITED STATES
IN THE CASE OF☐ MAGISTRATE☐ DISTRICT☐ APPEALS COURT or☐ OTHER PANEL (Specify below)

U.S.

VS.

Anirudha
Patel

FOR

AT

APR 24 2008

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Anirudha Patel

CHARGE/OFFENSE (describe if applicable & check box →)

☒ Felony☐ Misdemeanor

21 USC 331(a) + 21 USC 333

MAGISTRATE JUDGE MARIA VALDEZ
UNITED STATES DISTRICT COURT

- 2 ☐ Defendant
- 3 ☐ Appellant
- 4 ☐ Probation Violator
- 5 ☐ Parole Violator
- 6 ☐ Habeas Petitioner
- 7 ☐ 2255 Petitioner
- 8 ☐ Material Witness
- 9 ☐ Other (Specify)

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

08 CR 340

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT

Are you now employed? ☐ Yes ☒ No ☐ Am Self Employed

Name and address of employer:

IF YES, how much do you
earn per month? \$IF NO, give month and year of last employment
How much did you earn per month? \$

8/2007; \$2800/m

If married is your Spouse employed?

☐ Yes☒ NoIF YES, how much does your
Spouse earn per month? \$If a minor under age 21, what is your Parents or
Guardian's approximate monthly income? \$

OTHER INCOME

Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☒ NoIF YES, GIVE THE AMOUNT
RECEIVED & IDENTIFY \$
THE SOURCES

RECEIVED

SOURCES

CASH

Have you any cash on hand or money in savings or checking account? ☒ Yes ☐ No IF YES, state total amount \$

4,000 - 5,000

PROPERTY

Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☒ NoIF YES, GIVE THE VALUE AND \$
DESCRIBE IT

VALUE

DESCRIPTION

3,000

2 cars: 99 Toyota, 01 Nissan

DEPENDENTS

MARITAL STATUS

☐ SINGLE☒ MARRIED☐ WIDOWED☐ SEPARATED OR
DIVORCEDTotal
No. of
Dependents

3

List persons you actually support and your relationship to them

DEBTS & MONTHLY BILLS

(LIST ALL CREDITORS,
INCLUDING BANKS,
LOAN COMPANIES,
CHARGE ACCOUNTS,
ETC.)APARTMENT
OR HOME:

Creditors

Total Debt

Monthly Payt.

household bills (gas, groceries, phone)

insurance

school

\$

\$ 700

\$

\$ 110

\$

\$ 150

\$

\$

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 4/24/08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)